A Strength-based Approach to Ageing Well: the Housing Dimension

This Viewpoint for the Housing LIN explores the issue of connecting older, vulnerable people with their community, and suggests that the key is to be found in working with the strengths of individuals and communities, in order to develop new connections and build relationships. This is not to suggest that ‘community’ can replace or perhaps even reduce the need for services in all areas, but that it is an essential component in promoting health and well-being.

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Introduction

The importance of good quality housing and the connection between housing and health has long been recognised. However, there is still much work to do to connect their separate systems (Buggins et al, 2012). Historically responses often took the form of institutions such as hospitals, hostels or care homes. More recently, the fundamental importance of dignity and choice have been recognised and the benefits of maintaining ‘independence’ and ‘having one’s own front door’ have been clearly demonstrated, whilst the personalisation of care services is developing. Yet none of us can live as islands. Although we value choice and self-determination, we thrive on interdependence rather than independence. Services, even if highly personalised and respectful of personal choice and dignity, cannot meet all our needs as human beings. They are often ‘necessary’ but are never ‘sufficient’ for our health and well-being.

The influential Marmot review noted that: “Individuals who are socially isolated are between two and five times more likely than those who have strong social ties to die prematurely. Social networks have a larger impact on the risk of mortality than on the risk of developing disease, that is, it is not so much that social networks stop you from getting ill, but that they help you to recover when you do get ill." (Marmot, 2010)

Although isolation is the “hidden killer” of older people, much less attention has been given to considering how vulnerable people can be linked with communities than how they can be linked with services. This Viewpoint for the Housing LIN explores this issue and suggests that the key is to be found in working with the strengths of individuals and communities, in order to develop new connections and build relationships. This is not to suggest that ‘community’ can replace or perhaps even reduce the need for services in all areas, but that it is an essential component in promoting health and well-being.

The concept of ‘community' in housing for older people

Recognition of the problem of isolation amongst older people is not new. In the 1950’s Richard Carr-Gomm founded the Abbeyfield Society to combat the problem that he saw as most significant, particularly among the old, which was that of loneliness. "Wherever I travelled I saw single elderly people sitting on park benches or looking out of windows, coming out of public libraries or walking, it seemed aimlessly, down the streets.” Carr Gomm, ‘Push on the Door’ (1979).

The traditional Abbeyfield model was based on household-sized groups of older people who lived together in a ‘community’ and shared meals, which addressed the problem of loneliness that Carr Gomm observed, even though his shared housing model now seems very dated.

Sheltered Housing schemes have traditionally been built with a room for community activities, in recognition of the fact that the sense of community is an important part of a supportive environment. Indeed, it was generally assumed that there would be an element of mutual support as a result of a ‘balanced community’ of older people, although there were few studies and very little evidence for whether this actually happened. Nevertheless, a common argument in favour of sheltered and, more recently, extra care housing, is the idea that by creating a ‘balanced community’ of older people, frailer residents will benefit from the peer support, volunteering activities and greater vibrancy that are possible where there are younger, fitter residents. In the last few years, various research studies have explored this
idea and found that the evidence of inclusive communities within older persons’ housing schemes is mixed. Evans and Vallelly (2007) found that the most important factors affecting social well-being amongst tenants of the extra-care schemes they examined were:

- adequately funded activities that cater for a range of interests and abilities
- opportunities to develop and maintain a social life
- the involvement of interested parties at an early stage, to integrate housing schemes with the local community
- restaurants and shops as venues for social interaction
- care and support services outside core hours of work

Opportunities to develop and maintain a social life and take part in activities may be increased where the community is more balanced; but equally the study found that some tenants were at particular risk of social exclusion: these included those people who did not have regular contact with family or friends and those with impaired mobility or reduced cognitive function. So, frailer residents may not automatically benefit from being part of a more vibrant community or indeed a community that, while having a diversity of abilities, does not provide the supports that an intergenerational community can. Callaghan et al (2009) similarly reported that those with higher care needs could sometimes face isolation in extra care schemes. This underlines the need to be intentional about inclusion, even in a setting where the majority of the community have support needs. It also raises questions around practices of aggregating people by age, albeit older people with mixed capacity and support needs.

That said, Evans and Valletly (2007) found that it was the more intimate and confiding relationships that were the most important ones in terms of maintaining health, a sense of well-being and self-identity in later life. In this connection, extra care housing offers clear advantages compared with a care home; these flow from it being perceived as ‘housing’ first and a ‘care setting’ second. Its housing status helps residents to retain long standing connections with the wider community better than a care home, it enables couples to remain together and it provides an environment where family and friends can more readily visit.

Pannell and Blood (2011) reviewed the development of mutual support and social capital within retirement housing and noted that recent evidence suggests extra care housing does bring new friends and social life for most of those moving in; but that in some cases it may have a tendency to reduce links with the wider community.

The evidence from these and other studies seems to suggest that whilst retirement housing can bring benefits in terms of combating isolation, one cannot assume that a supportive community will necessarily develop on its own (Mitchell, 2012). So it is important to develop social networks within schemes, but connections with the wider community are also critical.

The ‘HAPPI’ report noted that there was some evidence that extra-care schemes and retirement villages that choose to provide facilities for ‘residents only’ may restrict opportunities for wider community interaction and may therefore increase isolation. The report highlighted the significance of place and community context:

“Throughout the HAPPI visits, the importance of a sense of belonging to a neighbourhood was evident. However accessible and attractive a home might be, our
capacity to enjoy it will be undermined if we feel isolated or insecure. Such feelings increase with age, especially if we are left alone after the death of a partner. Remaining active in the context of a community, in a neighbourhood we know, is crucial to our quality of life and how we feel about the future.”

The panel, Chaired by Lord Best, noted that one of the strongest messages in the developments they visited in Europe was the extent to which housing for older people was initiated by the community. Housing Associations had worked very closely with the community to develop the concept, and engagement with the surrounding community was also central to their design and management ethos. They observed that the number of volunteers supporting the management and care teams was a testimony to this. In summary, the report noted: “Space, light, accessibility and a shared sense of purpose – the idea of being part of a community, and of ordinary people taking control of housing processes – have been recurring themes.” (HAPPI 2011)

Considering the development of social capital and community engagement within retirement housing schemes and their connection with the surrounding community is therefore critical in relation to the design of new schemes and the management of existing ones. But it represents a very small part of the picture, since only 1% of older people live in specialist retirement housing (i.e. sheltered housing, extra care etc.) The vast majority of older people not only aspire to remain in their existing home as they age, they actually do so. As a result, it is essential to consider the experience of older people in ordinary housing, especially those with care needs, in connecting with their community - and how the providers of housing can facilitate this process. This will also be relevant to the provision of non-specialist but ‘care ready’ housing aimed at older people, another recommendation of the HAPPI report.

**General needs housing and ‘community’**

In theory, housing provision is intimately connected with the development of communities or ‘place shaping’, but consideration of how the relational dimension of community development can be facilitated, or how communities can become more inclusive of people with disabilities, often seems to have been missed.

Nearly 10 years ago, the ‘Sustainable Communities Plan’ launched by the Deputy Prime Minister placed housing centre-stage and the rhetoric in the introduction was encouraging: “Housing and the local environment are vitally important. But communities are more than just housing. They have many requirements. Investing in housing alone, paying no attention to the other needs of communities, risks wasting money –as past experience has shown.”

The Plan launched the Decent Homes Strategy to bring all public sector housing up to a minimum standard, promoted stock transfers and tackled the need for growth with ambitious new town developments such as the Thames Gateway. It also contained initiatives to promote the development of green spaces and reduce crime and anti-social behaviour. Much of this was very valuable, but it was mostly based on a market renewal approach – improving the desirability of run down areas, or creating shiny new ones. As a result, we believe it was weak on plans for tackling the sustainability of the actual communities, the mechanisms for developing the social capital required to produce strong, inclusive communities.
What about the housing providers? Many housing associations (arguably some of the most successful social enterprises) were involved in implementing aspects of the Sustainable Communities Plan and many would brand themselves as community-based and emphasize their investment in communities (NHF, 2010). There are certainly plenty of examples where housing associations have specifically invested not only in meeting the housing needs of vulnerable people but also building the strength and resilience of the communities in which they live – and have seen this as part of their function as a social landlord. The work of the Housing Associations Charitable Trust should also be noted in this connection.

Nevertheless, Purkis (2010) questions the extent to which most associations actually empower the residents of the communities in which they work: whether they enhance citizen action and control and thus build social capital. He notes the impressive achievements of the sector (leverage of private finance, improvement of housing stock, provision for vulnerable groups, investment beyond bricks and mortar – e.g. ‘community’ projects, financial inclusion etc.) but questions whether the ‘business’ model, which is good for delivering services, is as good at delivering wider social purposes such as developing communities:

“Do [housing associations] exist principally to provide a good service to paying customers – an extremely important aim in its own right? Or do they exist for a wider social purpose, to build social capital and work for people and communities in need?”

In seeking to answer this question, he notes that whilst many Housing Associations have a commitment to serve wider social purposes and build communities, they are also aware that investing ‘beyond bricks and mortar’ delivers fewer neighbour disputes and less vandalism – and therefore reduces management and maintenance costs. So there is a strong element of business interest in the investment and, by the same token, a limit to the extent to which their activities can be focussed purely on building social capital and being led by the community. Perhaps that is the way it should be, because the surpluses that are re-invested come from rents paid by tenants - some of the least affluent members of their communities. But if it’s true, a piece of the jigsaw is missing.

**Lifetime Neighbourhoods**

Lifetime Neighbourhoods were first promoted under the National Strategy for Housing in an Ageing Society under the last government, but they are also endorsed in the Coalition’s housing strategy. The concept recognises that if older people are to live a good life, enjoy ‘active ageing’ and be supported in ‘community’ settings, more than just appropriate (‘lifetime’) housing is required. It must also be situated in an age-friendly neighbourhood. This is a concept with much merit, but it has not received a great deal of attention, nor really been proactively implemented.

In a study commissioned to explore and develop the concept, Bevan and Croucher (2011) comment: *Ideas of home and later life, and the housing aspirations of older people have been widely researched, however much less is understood about how neighbourhoods can or should change to meet the needs of older people. Research on neighbourhoods has tended to focus on issues about regeneration, and sustainability (see for example, Robertson et al, 2008) with little attention specifically given to how neighbourhoods will accommodate an increasingly older population.***
The Lifetime Neighbourhoods concept encompasses a number of key components:

- supporting residents to develop lifetime neighbourhoods – especially resident empowerment
- access
- services and amenities
- built and natural environments
- social networks/well-being
- housing

Whilst physical accessibility, amenities and services are important, the concept recognises that social factors - resident empowerment and social networks - are critical to ageing in place.

“How lifetime neighbourhoods are achieved is just as important as what is done to bring about necessary changes ...” “… Residents stand at the centre of achieving change within the areas in which they live.” (Bevan and Croucher 2011)

The World Health Organisation’s (W.H.O) concept of Age-Friendly Cities also recognises the importance of social integration, alongside age-friendly housing and infrastructure. The W.H.O. guide highlights, for example, the value of making activities and events accessible and the importance of special efforts to facilitate inclusion of older people or foster community integration. It notes the value of community facilities which promote shared, multi-purpose use by people of different ages; and local gathering places that promote familiarity and exchange among neighbourhood residents.

The difficulty with the Lifetime Neighbourhoods and Age Friendly Cities concepts is that they don’t appear to articulate a process of implementation. As a result, perhaps, research undertaken by the University of York - cited in the All Party Parliamentary Group on Housing and Care for Older People Inquiry report, Living Well at Home (Porteus 2011) - found that very few local authorities had made any explicit reference to ‘age-friendly’ strategies in their local community plans. We suggest that strength-based approaches can offer effective ways to realise the aspiration within Lifetime Neighbourhoods and Age Friendly Cities, of creating social networks and developing social capital.

**What are strength-based approaches?**

Strength-based approaches focus on developing the capacities of individuals and communities and connecting them in new ways – supporting and celebrating the contribution of those who are vulnerable and marginalised, whilst developing the capacity of the community to become more hospitable and inclusive. Such approaches are consistent with the personalisation agenda, but look at how people can connect and contribute, not just what services they need to purchase.

This is not ‘Big Society’, or a call for more volunteering; it is a set of approaches that starts with the positive as a basis for developing innovative and sustainable solutions. It’s not a ‘Pollyanna’ approach that just looks on the bright side, but instead uses knowledge of ‘assets’ to make new connections and enhance social capital. A strength-based approach, focuses on what works and how to generate more of it, rather than focussing on the deficits and problems.
Foot and Hopkins (2009) in *A glass half-full* provide a helpful summary of how strength-based (or ‘asset-based’) approaches can improve community health and well-being. The significance of strengths (or ‘assets’) has also been recognised in relation to Joint Strategic Needs Assessments. Guidance on JSNA best-practice suggests that an assessment of assets is required to balance the predominantly deficit-based approach, which uses indicators of mortality and morbidity etc., is now widely considered to be exclusively pathogenic (promoting a model of sickness and not health and wellness) and therefore unsustainable (Local Government Improvement and Development, 2011). Meanwhile, there is growing recognition of the benefits of ‘co-production’ in public sector and third sector work-streams, which is both complementary to, and relies on, an assets approach; but whilst the term ‘co-production’ is mostly used in relation to the delivery of public services based on an equal relationship between professionals and people using services, strength-based approaches encompass wider community assets and go beyond the provision of ‘services’.

The wider literature suggests six common traits of strength-based approaches:

1. The central role of ‘associational life’: building relationships between residents and their civic associations, both formal and informal, is the *sine qua non* of strength-based approaches.

2. Development is driven by citizens: success in community building is defined by the extent to which it is citizen-driven, either by individual citizens acting on their own agency to enhance wellbeing, or those participating in community life.

3. Wide participation: successful strength-based approaches to development reach deep into a neighbourhood and widely across its citizens: the shape of representative structures must be ‘flat’ and not hierarchical to be truly representative and powerful. (So, in the context of this paper, whilst the focus may be on ageing in place, there needs to be a recognition that the issue of ageing affects everyone, and is best addressed across the life course and by including the community as a whole in creating age-friendly plans.)

4. Localise to realise: the levels at which people naturally organise and engage in community life are those of kinship and neighbourhood. These are the levels where community development thrives. By implication housing providers and local authorities should organise their services the way that people organise their lives – by neighbourhood (rather than by function, which leads to a silo approach).

5. Assets are everywhere: each citizen’s capacities, and the aggregation of these capacities in associational life, together form the ‘seed capital’ of a community where people can age well. There are also untapped resources in the physical, economic and cultural landscapes that are an equally rich resource to assist in the building of age-friendly communities.

6. Build relationships first, then outcomes follow: the importance of the co-production principle is emphasised; achieving co-production requires a genuine partnership between citizens and professional agencies with the citizen in the lead and professionals in a support role. Through co-production the unique functions and competencies of both parties are brought into a complementary relationship. The result is enhanced outcomes.
A number of tools and techniques fall within the description of ‘strength-based approaches’ to working with communities, including: Appreciative Inquiry, World Café, Open Space Technology, Positive Deviance, Story Telling and Participatory Appraisal.

A community building approach that draws on a number of such techniques in one framework is Asset Based Community Development (or ‘ABCD’ for short). Hence in this Viewpoint we have chosen to focus on ABCD and its capacity for influencing the agenda of ‘ageing well in place’.

**Asset Based Community Development**

**What is ABCD - what does it involve?**

While there are no pre-set or prescribed steps to Asset Based Community Development, there are a number of processes or ‘stepping stones’ which enable deeper engagement and greater levels of citizen led action. Like stepping stones across a stream, there may be more than one route to reach the other side, but it may be difficult to try to jump straight to the furthest stones and if you try you are likely to suffer the consequences!

**Stepping stone one: find ‘connectors’**

Find a small group of ‘connectors’ who know the community well and are willing to work with each other to reach out to the wider community, particularly those on the margins.

The best way to explain the role of a ‘connector’ is to give a description of the activities of a person who was a connector in the Thornton Heath experience, which is presented as a case study below. A lady named Shirley (a connector) visited two separate homes. The first visit was to the home of Mr and Mrs Ahmed, a couple in their 30’s who live in a small flat with their two children. They had moved to the area the previous year and so were still finding their feet, eager to make friends and find out more about what was going on in the community. Shirley’s initial conversation revealed that Mrs Ahmed was passionate about cooking and collecting new recipes, while Mr Ahmed wanted his own allotment. The children also wanted a place to play, but they did not have a back garden. The initial conversation that a connector has is framed using the following questions:

- What do you care about enough to act upon?
- What gifts, skills and knowledge can you bring, to address what you care about?
- What would it take for you to work with others who share your concern?
- Do you know anybody whose assets you can tap into?

Later, Shirley visited Peggy, and asked her the same four questions (although it is important to note that each connector has their own particular way of phrasing the four questions, they are rarely repeated verbatim). Peggy’s response was: “I am 75 years old and my husband passed away six years ago. We’d been married 52 years. I get lonely sometimes and really miss him. Sometimes it would be nice to have someone just to talk to. I still love to bake cakes, but I have no one to appreciate them. I used to enjoy gardening but my poor health means my garden is full of weeds and looks awful.”

Shirley told Peggy about ‘the lovely couple with two gorgeous children’, she had met earlier, namely Mr and Mrs Ahmed, and asked if Peggy would be willing to meet them. Peggy jumped at the chance, particularly when Shirley told her how much they had in common.
Peggy’s garden is now used and cared for, and a supportive friendship has developed from their shared interests – but only because the connection was made between Peggy and Mr and Mrs Ahmed. Shirley is one of twenty-three neighbourhood connectors in Thornton Heath, and the above story is one of hundreds of connections that are resulting from building community this way.

**Stepping stone two: asset mapping**

As well as speaking with individuals, connectors also engage with formal and informal groups and networks at a local level. Once connectors have identified the assets of local residents and their ‘associations’ they can begin to support people to get connected to each other, the environment, and social/cultural activities.

Engaging with associations and social networks, from book reading clubs to faith groups, reveals a large bank of assets that often go unnoticed. These (typically un-constituted) groups are asked what it is they do, what they’d like to do more of, and what support would help them to take action to advance the ageing-well agenda in those areas.

This process should also include the mapping of physical assets, such as meeting places, unused land, green spaces and housing.

**Stepping stone three: identify community building themes**

As the concerns, aspirations and the combined assets of the residents, clubs and groups become clear, the issues they would be prepared to come behind and work on in a collective way become apparent. These are called ‘community building themes’. It rarely happens that these themes don’t include an eagerness to address issues of older people’s isolation. It is the role of the Community Builder (who could be a member of staff at a local Housing Association) to support the connectors to engage around these community building themes and to begin to connect individuals and associations who share a concern or passion around a particular theme. Focusing on community building themes that have emerged directly from the community allows the Community Builder and Community Connector to ‘go with the grain’ of the community, working on the community’s priorities, whilst also supporting local people to break out of silos of their own and begin to work with other residents who they may not necessarily meet through their existing networks.

**Stepping stone four: building connections**

As community building themes emerge and translate into citizen led action, the issue emerges of how best to begin to connect the various groups and individuals together. At this stage supporting the connectors to convene a wider community conversation makes sense. Something like an ideas fair works really well, where people can discuss what they are proud of, and what else they would like to create, building on those strengths. The ideas fair can be facilitated using an Appreciative Inquiry type methodology.

**Stepping stone five: match grants**

In some instances residents will require some seed-funding to make a small purchase. The use of matching funds is particularly useful here, as it changes the focus from a grant to a development fund. The matching fund offers small amounts of money of between £250 - £500, which must be matched pound for pound with the sweat equity of residents in the form
of energy, time and commitment. Typically, each hour of resident time is valued at £12 for matching purposes. A local agent like a credit union or a housing association is found to act as a fiscal agent so groups that are not constituted can receive funds. The criteria should be structured to ensure that projects promote inclusion. The invitation may be as simple as: ‘if you and three of your neighbours are prepared to do something new to include older people in the neighbourhood you can apply’. The red tape should be kept to a minimum and the decision making should be community led, with the support of the connectors and associations.

Stepping stone six: celebration and planning

At this point people who have been involved in the process are invited to come and share their experiences and successes. They are then facilitated by the community builder and connectors to think about what else the community would need to do to become an age-friendly community. Once people have identified the preconditions to an age-friendly community they are supported to identify:

1. From those preconditions what can they do using assets from within their community?
2. What would they need help with?
3. What do they need outside agencies to do unilaterally?

The answers to these questions create an action plan for developing an age friendly community built on strength-based principles, with which the community is truly engaged and already active in implementing.

Why is ABCD effective?

Asset-Based Community Development (ABCD) is a community development approach that is broad in scope, solution-focused, strength based and community driven. It asserts that connected communities can drive their own local development processes, identify and mobilise existing, untapped or undiscovered assets; and can respond to and create economic and other development opportunities. The fuel of ABCD is to be found in the personal attributes, skills and relationships behind informal networks and local associations (Kretzmann and McKnight 1993; Russell 2011).

Many individuals and groups within communities are traditionally defined more in terms of their deficits or needs than their competencies, capacities and resources.

“Think of a carpenter who has lost one leg in an accident years ago. Clearly he has a deficiency. However, he also has a skill. If we know he has a missing leg, we cannot build our community with that information. If we know he has capacity as a wood worker, that information can literally build our community.” Kretzmann and McKnight (1993).

Mobilising and celebrating local, social assets allows all citizens, especially those that are marginalised, to view their neighbourhood in a new light: to see its capacity and not just its neediness. ABCD aims to shift how communities view themselves and each other, and by extension, how professionals and institutions also view those communities – this is nothing
less than the creation of a new map of the peaks and valleys in the social, cultural and economic life of communities (Diers 2004).

ABCD argues that when citizens address issues within their unique competencies they build social capital and social cohesion; not doing so depletes social capital and exacerbates social fabric issues. When outside experts come in and do for citizens what citizens are best placed to do for themselves, an iatrogenic (the opposite outcome to what is intended) impact is effected, increasing agency-dependency, which often depletes personal and civic agency, further eroding the social fabric (Gibson 1996). The more vulnerable a person is, the more important it is that those who are paid to help such individuals and their wider community hold true to the primary rule of community development: ‘never do for another, what they can do for themselves’.

Strength-based approaches in general and ABCD in particular suggest that formal systems and the organisations that employ them are limited in the face of many social problems – they cannot match the untapped power of community, a power ABCD recognises and seeks to release (Edwards 2009).

Hence, it is argued that even if organisations (e.g. housing associations or care agencies) functioned at optimum capacity, possessed unlimited resources and operated unilaterally, they would not be able to regenerate the social fabric of neighbourhoods in any sustainable way (Bunt and Harris 2010).

This assertion holds true at the individual level too: that no organisation or collection of organisations can unilaterally meet all the needs of older people. Mindful of these limits ABCD invites citizens, especially those on the margins, (as is the case for many older people) to build new connections and new support networks – and thus grow social capital.

As a result, the ABCD approach presents a positive challenge to organisations such as housing and care providers that work with older people: to nurture the growth of this social capital, to partner with older people and promote genuine partnerships.

**ABCD Case Study: Thornton Heath**

In mid-2011, Croydon NHS and Croydon Council jointly decided to commission an asset based approach to ageing well. The process that followed involved Croydon Voluntary Action taking a lead role in developing an asset based approach, supported by external mentoring in the Asset Based Community Development approach. From the outset the rules of engagement were intentionally turned upside down. The process started by looking for ‘connectors’: ordinary local people who are deeply respected and who are extra-ordinary in relation to their level of connection with others in the community. CVA recruited 23 ‘connectors’ who in turn conducted hundreds of individual conversations with their neighbours and with the social networks in Thornton Heath.

The results have been hugely impressive: people coming together on their own strengths to broker more age-friendly arrangements in the neighbourhood, groups coming alongside vulnerable neighbours, and scores of other citizen-led initiatives where people are using their capacities and resources to address a range of challenges and thereby strengthen the community.

(One example involved older people who were finding it hard to use local supermarkets due to the speed of checkout staff: they felt harried at the tills because checkout staff were
incentivised by the speed with which they dealt with customers. Many were also struggling to cope with trolleys and negotiate a large, crowded store. As a result of advocacy by the connectors and older people themselves, arrangements were put in place to set aside times when the pace was slower, staff were trained to be more sensitive to older people’s needs, seats were provided in the aisles and local volunteers came into the store to provide assistance.

All the effort in Thornton Heath is leading towards the development of a neighbourhood plan. The potency of that plan when published will be that it will be truly citizen led, and will have involved the voices and collective agency of the entire community and not just a chosen few. So, it will not sit on a shelf, but instead be a living account of real citizen empowerment and stand as a record in answer to the three questions residents in Thornton Heath have been asking themselves and each other over the last year:

1. What can we do with ‘people power’ to make Thornton Heath healthier, safer, more inclusive and prosperous? (Citizen-led)
2. What help do we need from outside? (Co-production)
3. What do we expect systems/institutions to do unilaterally? (Systems-led)

Sarah Taylor, programme manager for Croydon Voluntary Action which has facilitated the process along with her colleague Paul Macey, commented: “The ‘glass is overflowing’ in Thornton Heath with riches that can’t be bought. It’s incredibly fulfilling working with people who, despite challenges, have an abundance of skills, knowledge, energy and commitment to give to their area and community. Local people and what they bring, their ‘assets’, are so often under-valued, at a cost to us all.”

The next steps in Thornton Heath are for Community Connectors and groups of neighbours in Thornton Heath to continue to develop their plans on what they want to act on together with a view to coming together again soon for a community planning session. Alongside this a ‘Community First Thornton Heath’ panel will be formed, with support from CVA, to help local people who are developing inspiring community projects in Thornton Heath to access small grants to support their work.

‘Community building’ compared with the ‘social service’ approach

ABCD offers an alternative model for third sector organisations for engaging with older people. At present the dominant model is what we have described below as the ‘social service’ model. The second we have referred to as the ‘community building’ approach. The dominance of the social service model tends to be proportionate to the level of perceived and/or actual vulnerability of the target group. Table 1 illustrates the prevailing focus and distinguishing features of each model. The social service and community building models are not, of course, mutually exclusive; each is useful but neither can do the job of the other.

Internationally, there is evidence of a shift from top-down, service provision and coordination in favour of service and policy development built by older people, communities and decision-makers (Kalache, 2008). This shift to ‘co-production’ is gaining ground in the UK replacing traditional forms of government-citizen relationships that we now see as ‘co-design’ relationships. Co-design effects to be an equal partnership, but only co-production feels like equality exists between the citizen and the agency.
<table>
<thead>
<tr>
<th>Social Services Model</th>
<th>Community Building (Asset Based) Model</th>
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<tbody>
<tr>
<td>Focus on deficiencies</td>
<td>Focus on assets (capacities, skills, relationships, resources)</td>
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<tr>
<td>Problem response</td>
<td>Opportunity identification</td>
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<tr>
<td>Charity orientation</td>
<td>Investment orientation</td>
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<tr>
<td>Grants go to other agencies or are funded to action agency priorities</td>
<td>Match funds, micro financing, investment for leverage, go to action community priorities. Sweet equity seen as a match</td>
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<tr>
<td>More services</td>
<td>More citizen led action,</td>
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<tr>
<td>High emphasis on agencies</td>
<td>Emphasis on Associations</td>
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<tr>
<td>Focus on individuals</td>
<td>Focus on communities/neighbourhoods</td>
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<tr>
<td>Focus on maintenance</td>
<td>Focus on development</td>
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<tr>
<td>Sees residents as clients/customers</td>
<td>Sees residents as citizens and co-producers of sustainable age-friendly communities</td>
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<tr>
<td>Sees their role as fixing, saving, monitoring, managing people</td>
<td>See their role as coming alongside people to help them develop their potential and connections</td>
</tr>
<tr>
<td>Believes programmes are the answer to social and economic challenges</td>
<td>Believes that people are the answer to social and economic challenges and must be supported to identify local response in an inclusive way.</td>
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NESTA’s *Mass Localism: A way to help small communities solve big problems* (Bunt and Harris, 2010) highlights challenges and calls us to focus on an important question; how can government support micro-policies while aiming to achieve results at the macro level? The dilemma is one of scale. Centralists want ‘scalable-solutions’, but this ambition is complicated by the bottom-up, ‘inside out’, locally-determined nature of the ventures that make local action successful and sustainable. ‘Mass localism’, as presented by NESTA, argues for new attitudes from government to ideas of scale:

“...instead of assuming that the best solutions need to be determined, prescribed, driven or ‘authorised’ from the centre, policymakers should create more opportunities for communities to develop and deliver their own solutions and to learn from each other. It is not enough to assume that scaling back government bureaucracy and control will allow local innovation to flourish.”
Local and national governments’ roles are to create an enabling environment in which local responses are nurtured for their own sake. The question of scale may then be addressed by sharing innovation through, for example, forums, stories and events like festivals. Such events make localism ‘viral’ and create non-prescriptive, scaled-across instead of scaled-up effects, leading to the paradox of ‘mass localism’.

Community building approaches to fostering health and well-being can meet many public health and social care challenges. Their characteristics - associational, citizen-driven, participatory, localised, strengths-based and co-produced - offer the most effective pathway for building age-friendly communities, where the assets of older people are at the centre. Neighbourhood partnerships with strong community leadership, linking health, housing and other local public services must therefore become the basic unit of housing, health and local government.

Sufficient evidence now exists to affirm the merits of greater investment in Asset Based Community Development to advance the ageing-well in place agenda. Promoting the utility of community development towards fostering better outcomes for our most vulnerable citizens requires professionals and institutions to move away from a social services model almost exclusively focused on service provision and intervention, towards a citizen-led co-production model.

This call to action is not in fact an invitation to enter unknown territories. Below are a number of case studies that show that this approach is not new to the social housing and social care landscape in Britain, or to the ageing-well agenda. The invitation is simply to build on previous success in implementing strength-based approaches, to create age-friendly housing and neighbourhoods across Britain.

**Examples of Strength-based approaches**

We have outlined above the ABCD (Asset Based Community Development) approach as a potential framework for strength-based work with communities; examples of other complementary approaches and initiatives which operate on strength-based principles are outlined below. The examples also show that strength-based approaches work amongst those with higher support needs, as well as the fitter members of communities. It’s “not a one-way street.” (Bowers et al, 2012)

**Mutual support**: Bowers et al (2012) provide examples of ways in which older people with high support needs take up roles based on ‘mutuality and reciprocity’, using their talents and strengths to give as well as receive support; older people being valued for their experience and resources rather than just receiving a service. Such arrangements could arise ‘informally’ (including as a result of an ABCD approach creating new connections between individuals in a community) but there are also various ways of facilitating them more directly, for example:

**Home-share** is a scheme that matches someone who needs some help to live independently in their own home with someone who has a housing need and can provide a little support. The ‘householders’ may be older people who own or are tenants in their own home, but who need some help or companionship. ‘Homesharers’ are often younger people who cannot afford housing where they work.

**Shared Lives** is an established and regulated approach to care which links a person with a disability to a family or individual, who then builds a two way relationship that includes family
and social networks, (rather than a one-way professional support relationship). Whilst it is mainly concerned with support networks, it may also use housing as a resource and could prevent tenancy breakdown arising from isolation and lack of support.

**Circles of support** is an approach that builds networks around individuals, with similar potential benefits in terms of mutuality and relatedness for the individual, community and housing provider, as Shared Lives.

**Time Banking** provides a mechanism for mutual exchange based on time credits, which creates a mutually supportive network of neighbours, thus building new connections and friendships across a community. Thus, whilst it can help people to access help or services that they would not otherwise be able to afford, it also builds social networks - thereby reducing isolation and loneliness.

**KeyRing** is an established and successful model of support, particularly for people with learning disabilities. It is perhaps closer to a service delivery model than the approaches described above, but similarly has the capacity for mutual support and the building of social capital at the neighbourhood level. Working with KeyRing has advantages for housing professionals, for example supporting members to maintain their tenancies and rent payments, early interventions that save time and costs for housing providers.

**Co-housing** models for older people operate on the basis that members live consciously as a community. Brenton (2008) argues that senior co-housing “…offers a realistic alternative to a tradition of paternalism and benign neglect in relation to the old and isolated. It involves the older person as citizen not service recipient. It catches the mood of the baby-boomer generation now approaching old age, most of whom have equity not enjoyed by their parents or their children but many of whom have experienced divorce and separation as their parents did not…” It is strength-based since it depends upon active participation and shared responsibility, with benefits of increased neighbourliness and mutual support. Brenton argues that this approach offers a strong contrast to the habit of dependency and apathy which too often becomes the default mode of older people in many UK residential settings. Co-housing is a common model in Europe (see HAPPI report for examples combining co-housing with high quality design.) Hanover HA is supporting several groups developing senior co-housing in England.

Similarly, **Co-operative and Mutual Housing** models are common in Europe, but have not been pursued actively in this country since the 1980’s. However they offer advantages as a tenure model for housing that meets older people’s needs, without necessarily including all aspects of the co-housing concept. The co-operative principles have potential for generating more community connection, either in an inter-generational model or in retirement housing. The Commission on Co-operative and Mutual Housing (2009) notes that experience in existing co-operative housing schemes with elderly residents has shown that residents tend to look out for each other and provide companionship for those who feel in need of it.

MHA’s ‘**Live at Home**’ schemes deliver both services and activities in members’ own homes and other venues, delivered primarily by volunteers, while staff employed by MHA manage the service, assess members and recruit and match volunteers. The key elements are one-to-one befriending, signposting and a regular newsletter, but most schemes also offer social activities, shopping services, telephone links, transport, and a variety of interest groups and practical services. An evaluation of the schemes (Garwood, 2011) identified evidence of “…improved quality of life and wellbeing through being part of a web of social contacts,
services, activities and information, underpinned by trusting and caring relationships...” and therefore the schemes appear to deliver very positive outcomes at a relatively low cost.

Although the schemes are part of MHA they are semi-autonomous, responding to local needs and delivering services and activities primarily through volunteers, many of whom are older people themselves. Garwood notes that mutual benefit between volunteers and members is a key feature; and that the unusual, semi-autonomous structure leads to “…a balance between local determination and community ownership on the one hand, and a supportive and flexible infrastructure provided by MHA on the other…” There is therefore room within the approach for community assets to dovetail with service provision.

Beacon Hill ‘Village’ in Boston, USA, provides another interesting example of a fusion between mutual support, based on community building, and service delivery. Beacon Hill is a neighbourhood project and non-profit organisation set up by local residents, rather than a purpose built retirement village. It is founded on the premise that most older people want to stay in their existing home and neighbourhood. It combines three key elements:

- General ‘services’ (from building maintenance to dog walking) provided by a combination of professional providers and volunteers
- Community building – organized by the members themselves – which includes social activities, events, seminars and social groups
- ‘Assistance with living’ which includes both mutual support (e.g. help with shopping) and domiciliary care provided through an agency run by the ‘village’

Although there is a strong element of service provision, the ‘village’ (which operates as a kind of co-operative) also engages in community building activities; and since volunteer input is incorporated in the service provision this too serves to build social networks in the neighbourhood.

Local Area Co-ordination was originally developed in Australia to enable people with learning disabilities to live a good life in a community setting and became a driver of whole system reform which supported the development of alternative, asset based, cost effective community living models. It has subsequently developed in other countries and is now being developed in a number of areas in England. It aims to create networks of individuals, families, services and local communities and to promote self-sufficiency and local solutions, using strength-based approaches. It does this by combining often disconnected roles into one point of contact for a vulnerable person - working at a neighbourhood level and investing time in building trusting relationships, utilising the person’s individual gifts and those of their family / personal networks of friends, linking with existing community resources, promoting opportunities for contribution and actively developing an inclusive local community.

What does this mean for housing providers?

There are many things that ‘organisations’ and ‘systems’ do well. Building good quality housing and providing efficient management and maintenance services clearly fall within the remit of organisational competence. So why should housing providers be concerned with strength-based approaches - especially those that are not involved in the provision of care and support?
The first response to this question is that the principles of co-production have wide application to the provision of services beyond health and social care; indeed, the processes of tenant participation and engagement which are now embedded in good housing management practice are already some way along the road towards co-production, which, as we have seen is both complementary to and reliant on, an asset based approach.

Since asset based approaches go beyond the co-production of ‘services’, the second response is obviously that there will be much wider benefits, including benefits to the housing provider, from a community that is better connected and where social capital is more developed. These will include both general estate issues and individual tenancy issues, not to mention wider social purposes, such as the health and well-being of tenants.

In the context of older and vulnerable tenants, a lifetime home is insufficient unless it is located in a lifetime neighbourhood; and as we have seen strength-based approaches will be critical if the concept is to become a reality.

This still leaves the question of what housing organisations need to do to engage with strength-based approaches and how the approaches relate to their role as service providers. We suggest that there are a number of areas which housing providers can review and various actions that they could take to develop strength-based approaches:

- Consider the extent to which housing services and support services are co-produced rather than just co-designed.
- Consider the interface between the services they provide and the role of the community. Key questions are: what are we most competent to provide; and what is the community most competent to offer?
- Evaluate their investment ‘beyond bricks and mortar’ and consider whether it empowers communities
- Invest in Asset Based Community Development, rather than just improving physical infrastructure, or adding more ‘services’
- Undertake an asset mapping process to include physical assets that could support community development - e.g. communal rooms, garages, wasteland etc. – and do this in conjunction with other organisations to explore how these assets could be best employed in conjunction with the community assets.
- Consider Asset Management Strategies and Lettings Policies in relation to how the organization can facilitate the development of:
  - Lifetime Neighbourhoods
  - Network models such as KeyRing
  - Virtual or dispersed extra care models
  - ‘Homeshare’, ‘Circles of support’ etc.
- Ensure that barriers are removed so as not to hinder the development of strength-based approaches: e.g. tenancy conditions, rules / charging for use of communal rooms, use of green spaces etc.
- Review management and engagement structures to ensure that the organization can relate to communities at a neighbourhood level
• Develop models of support that give autonomy to communities (e.g. MHA Shared Lives or Beacon Hill). These types of models allow scope for communities both to have control and to contribute, whilst offering an infrastructure for the service delivery element

• Consider how to promote the co-production of services e.g. in extra care housing

• Develop packages of management and development services, to make technical or organisational infrastructure available to groups who wish to:
  ◦ co-produce housing management, support or care services
  ◦ develop co-operative housing
  ◦ develop co-housing schemes
  ◦ undertake a small neighbourhood project but need an organization to hold funds

**Summary**

There is much evidence of the importance of social networks in promoting health and wellbeing amongst older people and the negative effects of isolation and loneliness. Although this is recognised in concepts such as Lifetime Neighbourhoods, little attention has been given by policy makers to the means by which communities and social networks can actually be developed. Instead the focus has been on improving services, an approach which may be likened to providing better ambulances at the bottom of a cliff, rather than fences at the top.

There is increasing recognition of the value of strength-based approaches, which start with the assets of individuals and of the community and use them as a basis for developing innovative and sustainable solutions. Such solutions combine to create age-friendly neighbourhoods, which are critical to the well-being of the 99% of older people who don’t live in retirement housing and beneficial also to the one per cent who do. Asset Based Community Development offers a strength-based framework for weaving community assets together in new ways, building social networks and thereby enhancing social capital. In other words, working at the top of the cliff and well in from the edge, as well as at the bottom.

The invitation to housing providers is to review how they can use their resources to invest in the power of communities; and how their physical assets can be connected with individual and community assets to facilitate strength-based approaches to the challenges of ageing in place.
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The views expressed in this paper are those of the authors, and are not necessarily those of the organisations they represent, or of the Housing Learning and Improvement Network.

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Previously responsible for managing the Department of Health’s Extra Care Housing Fund, the Housing Learning and Improvement Network (LIN) is the leading ‘knowledge hub’ for a growing network of housing, health and social care professionals in England involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long term conditions.

For further information about the Housing LIN’s comprehensive list of online resources and shared learning and service improvement networking opportunities, including site visits and network meetings in your region, visit www.housinglin.org.uk

The Housing LIN welcomes contributions on a range of issues pertinent to housing with care for older and vulnerable adults. If there is a subject that you feel should be addressed, please contact us.

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